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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

FURINI 3X	For C	other Than An Au	uthorized Con	nmittee		Office Use Only	
NAME OF COMMITTEE (in ful		FEC MAILING LABEL PPE OR PRINT	- Example:If over the lin	typing, type nes			
		ongressional Committe	∌e _				
ADDRESS (number and s	treet) 85	Merrimac Street, Suite	9 400				
Check if differe than previously reported. (ACC	ı Bo	ston			MA J	02114	
2. FEC IDENTIFICATI	ON NUMBER	\	CITY A		STATE	ZIPCOD	E 🛕
C00042622		3.	IS THIS REPORT	NEW (N) OR		MENDED .)	
July 15 Quarterly I October 19 Quarterly I January 3	rts: Report(Q1) Report(Q2) Report(Q3) Report(YE) d-Year n-election (MY)	(c) 12-Day PRE-Election Report for the: Elec (d) 30-Day Post -Election Report for the:	Conve	May 20 (M5 X Jun 20 (M6) Jul 20 (M7) ry (12P) ention (12C) al (30G)	Sep	in the State of	Special (30S)
5. Covering Period	0.5	01 2007	thr	ough 0 5	3 1	2007	
I certify that I have examine Type or Print Name of Tr		and to the best of my l rent Andersen	knowledge and bel	ief it is true, correc	t and complete.		
Signature of Treasurer	Electronically I	Filed by Brent Ande	rsen		Date 0 6	11	2009
NOTE : Submission of fa	llse, erroneous,	or incomplete informat	tion may subject th	ne person signing t	his Report to the	e penalties of 2 U.S	S.C 437g.
Office Use						FEC FORI	

FE6AN026

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Massachusetts Republican State Congressional Committee [®] D D 0.5 0 1 2007 0.5 3 1 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 9164.06 Ž007 January 1 (b) Cash on Hand at 17355.01 Begining of Reporting Period 40592.89 292807.26 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 57947.90 301971.32 6(a) and 6(c) for Column B) 58988.88 303012.30 7. Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period -1040.98 -1040.98 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 72404.50 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

0 1 3^D1 м м 0 5 2007 м м 0 5 2007 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 189295.00 17075.00 (i) Itemized (use Schedule A) 13184.00 87696.17 (ii) Unitemized (iii) TOTAL (add 30259.00 276991.17 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 10246.73 11796.73 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 40505.73 288787.90 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 87.16 2256.14 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 1763.22 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 40592.89 292807.26 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 40592.89 292807.26 (subtract Line 18(c) from Line 19)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Expenditures.....

Committees.....

II. DISBURSEMENTS

(a) Shared Federal/Non-Federal Activity (from Schedule H4)

(b) Other Federal Operating

22. Transfers to Affiliated/Other Party

Contributions to

24. Independent Expenditure

27. Loans Made..... 28. Refunds of Contributions To:

23.

(c) Total Operating Expenditures

26. Loan Repayments Made.....

Individuals/Persons Other

(such as PACs) (d) Total Contribution Refunds

29. Other Disbursements.....

(a) Shared Federal Election Activity (from Schedule H6)

(i) Federal Share

(ii) "Levin" Share (b) Federal Election Activity Paid Entirely

With Federal Funds (c) Total Federal Election Activity (add

23, 24, 25, 26, 27, 28(d), 29 and 30(c))..

(subtract Line 21(a)(ii) and Line 30(a)(ii)

32. Total Federal Disbursements

from Line 31).....

Lines 30(a)(i), 30(a)(ii) and 30(b))....

(b) Political Party Committees (c) Other Political Committees

Than Political Committees

21. Operating Expenditures:

Page 4 **COLUMN A COLUMN B Total This Period** Calendar Year-to-Date 0.00 0.00 (i) Federal Share..... 0.00 0.00 (ii) Non-Federal Share..... 30660.59 199927.34 30660.59 199927.34 (add 21(a)(i), (a)(ii) and (b))............ 5000.00 15000.00 Federal Candidates/Committees.....and Other Political Committees..... 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.00 (add Lines 28(a), (b), and (c)) 0.00 0.00 30. Federal Election Activity (2 U.S.C 431(20)) 0.00 0.00 0.00 0.00 23328.29 88084.96 23328.29 88084.96 31. Total Disbursements (add Lines 21(c), 22, 58988.88 303012.30

58988.88

303012.30

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	40505.73	288787.90
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	40505.73	288787.90
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	30660.59	199927.34
37.	Offsets to Operating Expenditures (from Line 15, page 3)	87.16	2256.14
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	30573.43	197671.20

FE6AN026

Form/Schedule: F3XA

Transaction ID:

ALL ACTIVITY WAS SOLELY RELATED TO MASS.REPUBLICAN PARTY ACTIVITY. NO ACTIVITY INVOLVED A CANDIDATE. NO MAILINGS OR OTHER ACTIVITY MENTIONED ANY OTHER FEDERAL CANDIDATE. NO ACTIVITY MENTIONED ANY OTHER FEDERAL CANDIDATE.

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 43 (check only one) X 11a 11b 11c 12 13 14 15 16 17
0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements ma name and ad	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Massachusetts Republican State Cong	gressional C	ommittee	
∠ A.	Full Name (Last, First, Middle Initial) Mariann Appley			Date of Receipt
	Mailing Address 2 Commonwealth Ave	nue		0 5 0 1 2 0 0 7
	City Boston	State MA	Zip Code 02116	Transaction ID: 70514.C165446 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer Self Employed	Occupatio Artist	n	Receipt
	Receipt For: Primary General Other (specify)		e Year-to-Date ▼ 400.00	
— В.	Full Name (Last, First, Middle Initial) Mark Cohen Mailing Address 125 Chestnut Street			Date of Receipt
				05 29 2007
	City Concord	State MA	Zip Code 01742	Transaction ID: 70613.C165737
	FEC ID number of contributing federal political committee.	C	01742	Amount of Each Receipt this Period 3000.00
	Name of Employer Office Paper Recovery Sys. Inc	Occupatio Executive		Receipt
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 3000.00	
_ C.	Full Name (Last, First, Middle Initial) David Conlin			Date of Receipt
	Mailing Address 171 Willow Rd. DO NOT CALL			0 5 0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Nahant	State MA	Zip Code 01908	Transaction ID: 70514.C165423 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	01900	250.00
	Name of Employer Edwards & Angell, LLP	Occupatio Attorney	n	Receipt
	Receipt For: Primary General Other (specify) ▼	, ' 	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			3450.00
t	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 43 (check only one) X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Republican State Cong	e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) James Davis Mailing Address 9 The Ledges Road City Newton FEC ID number of contributing federal political committee. Name of Employer New Balance Shoes Receipt For: Primary General Other (specify) Full Name (Last, First, Middle Initial) Dianne Fanjoy Mailing Address 34 Humphrey Street City Swampscott FEC ID number of contributing federal political committee. Name of Employer Wildon Group, Inc Receipt For: Primary General Other (specify) General Other (specify)	State Zip Code MA 02459 C Occupation CEO Aggregate Year-to-Date ▼ 15000.00 State Zip Code MA 01907-2556 C Occupation Corporate Sales Aggregate Year-to-Date ▼	Date of Receipt M M D D 2 0 0 7
Full Name (Last, First, Middle Initial) William Frothingham Mailing Address 117 School St City Manchester FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify)	State Zip Code MA 01944 C Occupation Retired Aggregate Year-to-Date 200.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		600.00

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	totomosto mo	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 43 (check only one) X 11a
\ \ 	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Republican State Cong	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ A .	Full Name (Last, First, Middle Initial) Thomas Hazen Mailing Address 17 College View Hts City South Hadley FEC ID number of contributing federal political committee. Name of Employer Hazen Paper Company Receipt For:	State MA C Occupation Consulta Aggregate		Date of Receipt M M D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
_	Primary General Other (specify) ▼ Full Name (Last, First, Middle Initial)	199.094	600.00	Date of Receipt
В.	Arthur Hilsinger Mailing Address 8 Jackson Pond Rd. City Dedham FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify)	State MA C Occupation Retired Aggregate	Zip Code 02026 on e Year-to-Date ▼ 500.00	Transaction ID: 70613.C165720 Amount of Each Receipt this Period 500.00 Receipt
C.	Full Name (Last, First, Middle Initial) Robert Hiss Mailing Address 273 Adams Street City Milton FEC ID number of contributing federal political committee. Name of Employer Get Back Software Receipt For: Primary General Other (specify)		Zip Code 02186 on e Executive e Year-to-Date ▼ 200.00	Date of Receipt M M M
	SUBTOTAL of Receipts This Page (optional)			1050.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 43 (check only one) X
, C	Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may r ne name and addre	not be sold or used by any persess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Massachusetts Republican State Cor	ngressional Cor	mmittee	
Α.	Full Name (Last, First, Middle Initial) Keith Jennings			Date of Receipt
	Mailing Address 20 Gates Street #2			05 24 2007
	City Boston	State MA	Zip Code 02127	Transaction ID: 70613.C165721
	FEC ID number of contributing federal political committee.	C	02121	Amount of Each Receipt this Period 200.00
	Name of Employer Partners Healthcare System	Occupation Manageme	ent	Receipt
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	rear-to-Date ▼ 200.00	
	Full Name (Last, First, Middle Initial) Edward Johnson	1		Date of Receipt
	Mailing Address 56 North St			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City	State	Zip Code	Transaction ID: 70516.C165657
	Grafton	MA	01519	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00 Receipt
	Name of Employer Retired	Occupation Retired		1,000,01
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	rear-to-Date ▼ 250.00	
_).	Full Name (Last, First, Middle Initial) Thomas King			Date of Receipt
	Mailing Address PO Box 605 DO NOT MAIL			05 / 08 / 4 2007
	City Chatham	State MA	Zip Code 02633	Transaction ID: 70514.C165572 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		200.00
	Name of Employer Retired	Occupation Retired		Receipt
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	rear-to-Date ▼ 200.00	
Г	SUBTOTAL of Receipts This Page (optional)	<u>'</u>		650.00

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS Any information copied from such Reports and		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 43 (check only one) X 11a 11b 11c 12 13 14 15 16 17
	NAME OF COMMITTEE (In Full) Massachusetts Republican State Cor	e name and ad	dress of any political committee to	os solicit contributions from such committee.
A .	Full Name (Last, First, Middle Initial) Paul Marcus Mailing Address 77 Heath Street DO NOT CALL IN 200 City Brookline FEC ID number of contributing federal political committee. Name of Employer Information Requested Receipt For: Primary General Other (specify)	State MA C Occupation Informat	Zip Code 02445 on ion Requested e Year-to-Date ▼ 5000.00	Date of Receipt M
- В.	Full Name (Last, First, Middle Initial) Edward Michaud Mailing Address 12 Highland St. City Weston FEC ID number of contributing federal political committee. Name of Employer Self Employed Receipt For: Primary General Other (specify)	State MA C Occupation Orthodo Aggregate		Date of Receipt M M
c .	Full Name (Last, First, Middle Initial) Alan Morse, Jr. Mailing Address 160 Aspinwall Ave., L DO NOT MAIL- duplic City Brookline FEC ID number of contributing federal political committee. Name of Employer Retired Receipt For: Primary General Other (specify)	State MA C Occupation Retired	Zip Code 02446 on e Year-to-Date ▼	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		•	5225.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 43 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may not be sold or used by any person he name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Massachusetts Republican State Co	ngressional Committee	
Full Name (Last, First, Middle Initial) Roland Perkins		Date of Receipt
Mailing Address 83 Lincoln Road	State Zip Code	0 5 0 1 2 0 0 7 2 0 0 7
City <u>Wayland</u>	State Zip Code MA 01778	Transaction ID: 70514.C165420 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Name of Employer Thomson Financial	Occupation Executive	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	
Full Name (Last, First, Middle Initial) Frank Pickering		Date of Receipt
Mailing Address 18 Strawberry Hill La		05 01 2007
City	State Zip Code	Transaction ID: 70514.C165445
<u>Danvers</u>	MA 01923	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	50.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Laurence Pierce		Date of Receipt
Mailing Address 25 Circle Street		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 70613.C165725
Marblehead	MA 01945	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Retired	Occupation Retired	Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		500.00
TOTAL This Period (last page this line numb	·	

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 43 (check only one) X 11a
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Republican State Cong	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
A.	Full Name (Last, First, Middle Initial) Michael Riendeau Mailing Address 74 River Street City Andover FEC ID number of contributing federal political committee. Name of Employer Analog Devices Receipt For: Primary General Other (specify)	, '	Zip Code 01810 Engineer Year-to-Date 200.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Б.	Full Name (Last, First, Middle Initial) Alfred Rossow Mailing Address 25 Epping Way City Marshfield FEC ID number of contributing federal political committee. Name of Employer Tully & Holland, Inc. Receipt For: Primary General Other (specify)	State MA C Occupation Consulta Aggregate		Date of Receipt M M / D D / Y Y Y Y Y O 5 3 1 2 0 0 7 Transaction ID: 70613.C165743 Amount of Each Receipt this Period 2000.00 Receipt
- С.	Full Name (Last, First, Middle Initial) Richard Sampson Mailing Address 8 Sheffield Rd. City Winchester FEC ID number of contributing federal political committee. Name of Employer American Alarm & Commun., Inc. Receipt For: Primary General Other (specify)	State MA C Occupation President Aggregate		Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number			3300.00

SCHEDULE A (FEC ITEMIZED RECEIPT	,	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 43 (check only one) X 11a
NAME OF COMMITTEE (In			on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle William Sawyer Mailing Address 15 Sprin City Concord FEC ID number of contributing federal political committee. Name of Employer Clarkin, Sawyer & Phillips	e Initial) g Hill Rd. State MA	Zip Code 01742	Date of Receipt 0 5 15 2 0 0 7 Transaction ID: 70516.C165652 Amount of Each Receipt this Period 100.00 Receipt
Receipt For: Primary Other (specify)		ear-to-Date ▼ 200.00	
Full Name (Last, First, Middle John Smidt Mailing Address 21 Skinn	,		Date of Receipt Date of Receipt 1 1 4 2 0 0 7
City	State	Zip Code	Transaction ID: 70516.C165646
Marblehead FEC ID number of contribution federal political committee.	mA C	01945	Amount of Each Receipt this Period 200.00
Name of Employer Retired	Occupation Retired		Receipt
Receipt For: Primary Gene Other (specify) ▼		ear-to-Date ▼ 200.00	
Full Name (Last, First, Middle Richard Sotell Mailing Address 31 Lathr			Date of Receipt 0 5 0 1 2 0 0 7
City	State	Zip Code	Transaction ID: 70514.C165451
Wellesley FEC ID number of contribution federal political committee.	MA C	02482	Amount of Each Receipt this Period 1000.00
Name of Employer Kraematon Group	Occupation President		Receipt
Receipt For: Primary Gene Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This I	Page (optional)		1300.00

A.

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SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 43 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and Sor for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Massachusetts Republican State Conc	gressional Committee	
Full Name (Last, First, Middle Initial)	grootional committee	
Sinclair Weeks		Date of Receipt
Mailing Address 100 Newbury Ct., Apt.	502	05 08 7 9 9 9
City	State Zip Code	Transaction ID: 70514.C165585
Concord	MA 01742	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Retired	Occupation Retired	- Receipt
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)		1000.00
TOTAL This Period (last page this line number only)	<u> </u>	17075.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS Any information copied from such Reports and S	tatements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any perso	FOR LINE NUMBER: PAGE 16 / 43 (check only one) 11a 11b X 11c 12 13 14 15 16 17 In for the purpose of soliciting contributions				
	or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Republican State Cong	solicit contributions from such committee.						
Α.	Full Name (Last, First, Middle Initial) Committee to Elect Hofmann Mailing Address 223 Rutledge Road	Date of Receipt 0 5 1 7 2 0 0 7						
	City Belmont FEC ID number of contributing federal political committee.	State MA	Zip Code 02478	Transaction ID: 70613.C165690 Amount of Each Receipt this Period 7746.73				
	Name of Employer Candidate Committee Receipt For: Primary General Other (specify) ▼	Occupation 11911 Aggregate	re Year-to-Date ▼ 7746.73	Receipt				
В.	Full Name (Last, First, Middle Initial) Mintz Levin PAC Mailing Address Steve Silveira One Financial Center, Steve Silveira One Financial Center, Steve Silveira	38th Floor State MA	Zip Code 02111	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y				
	FEC ID number of contributing federal political committee.	C ID number of contributing						
	Name of Employer CPF ID: 80593	Occupatio Political	n Action Committee	Receipt				
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2500.00					

		10246 72
SUBTOTAL of Receipts This Page (optional)		10246.73
TOTAL This Period (last page this line number only)		10246.73

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER: PAGE 17 / 43										
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b											
	Detailed Guillinary Fage	27	28a 28b 28c 29 30b										
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name													
NAME OF COMMITTEE (In Full)													
Massachusetts Republican State Congress	sional Committee												
Full Name (Last, First, Middle Initial) Aristotle Publishing			Transaction ID: 70613.E9783 Date of Disbursement										
Mailing Address 50 E Street, SE			05 M / 21 / Y 2007										
City Washington	State Zip Code DC 20003-		Amount of Each Disbursement this Period										
Purpose of Disbursement Computer Software		· ·	3250.00										
Candidate Name		Category/ Type											
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼		COMPUTER SOFTWARE										
Full Name (Last, First, Middle Initial)			Transaction ID: 70510 50751										
Css Castle Self-Storage			Transaction ID: 70516.E9751 Date of Disbursement										
Mailing Address 39 Old Colony Ave.			$\begin{bmatrix} \begin{smallmatrix} M & 5 & M \\ 0 & 5 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$										
City Boston	State Zip Code MA 02127-		Amount of Each Disbursement this Period										
Purpose of Disbursement	02127	· · ·	349.00										
Storage Candidate Name		Category/ Type											
Senate President	ment For: Primary General Other (specify) ▼		STORAGE										
State: District: Full Name (Last, First, Middle Initial)													
DirecTV DirecTV			Transaction ID: 70613.E9784 Date of Disbursement										
Mailing Address PO Box 60036			$\begin{bmatrix} M & 5 & M \\ 0 & 5 & M \end{bmatrix} / \begin{bmatrix} D & D \\ D & 1 \end{bmatrix} / \begin{bmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{bmatrix}$										
City Los Angeles	State Zip Code CA 90060-0036		Amount of Each Disbursement this Period										
Purpose of Disbursement Cable Service			144.90										
Candidate Name		Category/ Type											
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		CABLE SERVICE										
State: District:													
SUBTOTAL of Disbursements This Page (optional)		<u>►</u>	3743.90										

A.

В.

C.

CHEDULE B (FEC Form 3X)	Use separate schedule(s) FOR LINE NUMBER:					PA	PAGE 18 / 43								
EMIZED DISBURSEMENTS	for each category of the	1_'	check o	nly c	· —	٦	_		. –	٦.,					
	Detailed Summary Page		21b 27		22 28a	23 28b	Н	24 28c	H 25		26 30b				
y Information copied from such Reports and State	 ments may not be sold or user	d by an		n for			olicit				1000				
for commercial purposes, other than using the nam															
NAME OF COMMITTEE (In Full)															
Massachusetts Republican State Congres	ssional Committee														
Full Name (Last, First, Middle Initial) Kirk Dobson					Transac Date of [-		.E975	3					
Mailing Address 1209 Boylston St.				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$											
City	State Zip Code			Amount of Each Disbursement this Period											
Boston	MA 02215-									00					
Purpose of Disbursement Reimbursement for Travel									44.	.20					
Candidate Name			gory/ pe												
Office Sought: Senate President State: Disburs Disburs State:	sement For: Primary General Other (specify)				REIMBL	JRSEN	ΛEN	IT FO	R TR/	AVEL	-				
Full Name (Last, First, Middle Initial) Federal Express (Fed Ex)					Transac Date of I				.E975	9					
Mailing Address PO Box 371461					05	/ D	7	/ Y	ž 0	ý 7 [°]					
City	State Zip Code				Amount	of Each	Dis	burser	ment th	is Per	iod				
Pittsburgh	PA 15250-										-				
Purpose of Disbursement Express Mail								16	.32						
Candidate Name		Category/ Type													
Senate President	sement For: Primary General Other (specify)				EXPRE	SS MA	ΔL								
State: District:				+											
Full Name (Last, First, Middle Initial) Fleet Bank					Transac Date of I	Disburs	eme								
Mailing Address 100 Federal Street					0 5	/ D	0	/ L	ž 0	Ď7 [*]					
City Boston	State Zip Code MA 02110-				Amount	of Each	Dis	burser			iod				
Purpose of Disbursement Bank Service Charge -NSF		· ·							5.	.00					
Candidate Name		gory/ pe													
Office Sought: House Disburs Senate President State: District:	sement For: Primary General Other (specify) ▼				BANK S	ERVIO	CE (CHAF	RGE -N	ISF					
JBTOTAL of Disbursements This Page (optional))		•						65.	52	·				
OTAL This Period (last page this line number only	/)		•												
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SCHEDULE B (FEC Form 3X)	Use separate scriedule(s) /-bl-						NE NUMBER: PAGE 19 / 43 only one)										
ITEMIZED DISBURSEMENTS		category of the Summary Page	-	X	_		22 28a	П	23 28b	24 28c	F	25 29	26 30b				
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NAME OF COMMITTEE (In Full)																	
Massachusetts Republican State Congress	sional Con	nmittee															
Full Name (Last, First, Middle Initial) Fleet Bank		Transaction ID: 70618.E9807 Date of Disbursement															
Mailing Address 100 Federal Street						05											
City	State	Amount of Each Disbursement this Period															
Boston	MA	02110-						-			-	0.50					
Purpose of Disbursement Bank Service Charge -EFT payment											-	3.50)				
Candidate Name					egory/ rpe												
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼				BANK SERVICE CHARGE -EFT PAYMENT						Γ					
Full Name (Last, First, Middle Initial)							Tuono		an ID:	70616		70E					
Garage Government Center								Transaction ID: 70613.E9785 Date of Disbursement									
Mailing Address 50 New Sudbury Street							o ^M 5	M	[′]	1 /	Ž	0 0 7	7 ^Y				
City Boston	State MA	Zip Code 02114-				Amount of Each Disbursement this						t this f	Period				
Purpose of Disbursement Parking							1280.00										
Candidate Name					egory/												
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼					PARK	(INC	3								
Full Name (Last, First, Middle Initial)																	
Guardian Guardian							Date of	of Di	on ID:								
Mailing Address Boston Group Office 1 Liberty Square							0 ^M 5	M	[′] 0	1 /	Ž	0 ŏ 7	7 ^Y				
City Boston	State MA	Zip Code 02109-					Amou	nt o	f Each	Disburse	-						
Purpose of Disbursement Insurance	rpose of Disbursement urance						L.				1	92.47	7				
Candidate Name					egory/ vpe												
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General ecify) ▼					INSUI	RAN	NCE								
State: District:		v															
SUBTOTAL of Disbursements This Page (optional)					. •			-			14	75.97	7				

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER: PAGE 20 / 43									
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b	☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26									
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Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam												
NAME OF COMMITTEE (In Full)												
Massachusetts Republican State Congress	sional Committee											
Full Name (Last, First, Middle Initial) Hampshire House		Transaction ID: 70613.E9765 Date of Disbursement										
Mailing Address 84 Beacon St.		0 5 M / D 1 D / Y 2 0 0 7										
City Boston	State Zip Code MA 02108-		Amount of Each Disbursement this Period									
Purpose of Disbursement	02100		750.00									
Event Catering Candidate Name		Category/ Type										
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	- 1	EVENT CATERING									
Full Name (Last, First, Middle Initial)			Transaction ID: 70613,E9787									
Lyndsay Jones			Date of Disbursement									
Mailing Address 16 Oval Road			$\begin{bmatrix} \begin{smallmatrix} M \\ D \end{smallmatrix} & \begin{smallmatrix} M \\ D \end{smallmatrix} & \begin{bmatrix} D \\$									
City Quincy	State Zip Code MA 02170-		Amount of Each Disbursement this Period									
Purpose of Disbursement	IVIA 02170-		148.99									
Reimbursement for travel												
Candidate Name		Category/ Type										
Senate President	ement For: Primary General Other (specify)		REIMBURSEMENT FOR TRAVEL									
State: District: Full Name (Last, First, Middle Initial)												
Lexis-Nexis			Transaction ID: 70613.E9786 Date of Disbursement									
Mailing Address PO Box 7247-7090			05 05 7 2 1 7 2 0 0 7									
City Philadelphia	State Zip Code PA 19170-		Amount of Each Disbursement this Period									
Purpose of Disbursement		-	1250.00									
Payment of debt for research party related												
Candidate Name		Category/ Type										
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	,	PAYMENT OF DEBT FOR RESEARCH PARTY RELATED									
State: District:	Carlor (opcony)											
SUBTOTAL of Disbursements This Page (optional)		>	2148.99									

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SCHEDULE B (FEC Form 3X)		FOR LIN	E NUMBER: PAGE 21 / 43										
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check o	<u> </u>										
	Detailed Summary Page	X 21b	22 23 28a 28	\square \square \square									
Any Information copied from such Reports and State	□ nents may not be sold or used												
or for commercial purposes, other than using the nan													
NAME OF COMMITTEE (In Full)													
/ Massachusetts Republican State Congres	sional Committee												
Full Name (Last, First, Middle Initial) Merchants Bankcard				ID : 70618.E9803									
Merchants Bankcard			Date of Disbursement M 5 M / D 0 1 Y Y Y O Y 7										
Mailing Address Fleet Bank 100 Federal Street													
City Boston	State Zip Code MA 02110-		Amount of Ea	ach Disbursement this Period									
Purpose of Disbursement Credit Car Fees			<u> </u>	103.26									
Candidate Name		Category/ Type											
Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)		CREDIT CAR FEES										
Full Name (Last, First, Middle Initial)													
Merchants Bankcard			Date of Disbu										
Mailing Address Fleet Bank 100 Federal Street			05 5	0 1									
City Boston	State Zip Code MA 02110-		Amount of Ea	ach Disbursement this Period									
Purpose of Disbursement Credit Card Fee				4.22									
Candidate Name		Category/ Type											
Office Sought: Senate President State: Disburs	ement For: Primary General Other (specify)		CREDIT CA	RD FEE									
Full Name (Last, First, Middle Initial)			-	ID 70040 F0700									
Merchants Bankcard			Date of Disbu										
Mailing Address Fleet Bank 100 Federal Street			05 5 /	0 1									
City Boston	State Zip Code MA 02110-		Amount of Ea	ach Disbursement this Period									
Purpose of Disbursement			L	26.20									
Credit card Fee Candidate Name		Category/ Type											
Office Sought: House Disburs Senate President	ement For: Primary Other (specify)	<u>, , , , , , , , , , , , , , , , , , , </u>	CREDIT CA	RD FEE									
State: District:													
SUBTOTAL of Disbursements This Page (optional)		>		133.68									
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SCHEDULE B (FEC Form 3X)						NE NUMBER: PAGE 22 / 43									
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only	22	23	24	П	25	26							
	, ,	27	28a	28b	28c	П	29	30b							
Any Information copied from such Reports and State or for commercial purposes, other than using the nar								;							
NAME OF COMMITTEE (In Full)															
Massachusetts Republican State Congres	sional Committee														
Full Name (Last, First, Middle Initial) Merchants Bankcard			Transaction ID: 70613.E9767 Date of Disbursement												
Mailing Address Fleet Bank 100 Federal Street															
City Boston	State Zip Code MA 02110-		Amount of Each Disbursement this Period												
Purpose of Disbursement Credit Card Fee	52.19	•				22	2.34								
Candidate Name		Category/ Type													
Senate President	ement For: Primary General Other (specify) ▼		CREDIT (CARD	FEE										
State: District: Full Name (Last, First, Middle Initial)			T	ID	70010	-	10.4								
Merchants Bankcard			Transaction Date of Display			.⊑98	04								
Mailing Address Fleet Bank 100 Federal Street		05 7 15 7 2007													
City Boston	State Zip Code MA 02110-		Amount of Each Disbursement this Period 25.00												
Purpose of Disbursement Credit Card Fee		*													
Candidate Name		Category/ Type													
Office Sought: House Disburs	ement For: Primary General Other (specify)		CREDIT (CARD) FEE										
Full Name (Last, First, Middle Initial)			Transaction	on ID:	70618	F98	805								
Merchants Bankcard			Date of Di	sburse	ment										
Mailing Address Fleet Bank 100 Federal Street			0 5	^D 2	5 / Y	ž	0 ŏ 7	, ^Y							
City Boston	State Zip Code MA 02110-		Amount of	Each	Disburse	-	-	-							
Purpose of Disbursement Credit Card Fee						5	0.00								
Candidate Name		Category/ Type													
Senate President	ement For: Primary General Other (specify)		CREDIT (CARD	FEE										
State: District:															
SUBTOTAL of Disbursements This Page (optional)		······ <u>}</u>				29	7.34								

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SCHEDULE B (FEC Form 3X)		FORLINE	NUMBER: PAGE 23 / 43									
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only										
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b									
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam	nents may not be sold or used e and address of any political	d by any person f committee to so	or the purpose of soliciting contributions licit contributions from such committee									
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	sional Committee											
Full Name (Last, First, Middle Initial)		Transaction ID: 70516.E9755										
Ox-Eye Properties			Date of Disbursement O 5									
Mailing Address c/o Massey & Co. 85 Merrimac Street			05 07 2007									
City Boston	State Zip Code MA 02114-		Amount of Each Disbursement this Period									
Purpose of Disbursement Rent	-		3695.00									
Candidate Name		Category/ Type										
Senate President	ement For: Primary General Other (specify)		RENT									
State: District:												
Full Name (Last, First, Middle Initial) Paychex/InterPay			Transaction ID: 70514.E9723 Date of Disbursement									
Mailing Address PO Box 8295			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & S \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} D & O \\ D & O \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y \\ D & O & O \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y \\ D & O & O \end{smallmatrix} \end{bmatrix} \ \ \begin{bmatrix} \begin{smallmatrix} Y & Y \\ D & O & O \end{smallmatrix} \end{bmatrix} \ \ \end{bmatrix}$									
City Boston	State Zip Code MA 02266-		Amount of Each Disbursement this Period									
Purpose of Disbursement Payroll-Taxes		· ·	3956.54									
Candidate Name		Category/ Type										
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		PAYROLL-TAXES									
State: District:	(-p 7/ V											
Full Name (Last, First, Middle Initial) Paychex/InterPay			Transaction ID: 70514.E9717 Date of Disbursement									
Mailing Address PO Box 8295			$\begin{bmatrix} \begin{smallmatrix} M & M \\ 0 & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ 1 & 0 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 7 \end{smallmatrix} \end{bmatrix}$									
City Boston	State Zip Code MA 02266-		Amount of Each Disbursement this Period									
Purpose of Disbursement Payroll Service Charges			141.41									
Candidate Name		Category/ Type										
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)		PAYROLL SERVICE CHARGES									
State: District:												
SURTOTAL of Dishursements This Page (ontional)			7792.95									

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SCHEDULE B (FEC Form 3X)	Use separat			NE NUMBER: PAGE 24 / 43													
ITEMIZED DISBURSEMENTS						ne) 22 28a	23		24 28c	F	25 29	26 30b					
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NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	ional Comm	ittee															
Full Name (Last, First, Middle Initial) Paychex/InterPay							Transaction ID: 70618.E9809 Date of Disbursement 05										
Mailing Address PO Box 8295					Amount of Each Disbursement this Period												
•		ip Code 12266-				Amou	nt of Ea	ch	Disburse	mer	t this I	Period					
Purpose of Disbursement Payroll Services - 401 K										1	55.00)					
Candidate Name				egory/ ype													
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (specify	General /) ▼	<u> </u>) 	PAYROLL SERVICES - 401 K												
Full Name (Last, First, Middle Initial)						Trans	action	ID:	70516	.E9	749						
Paychex/InterPay						М	of Disbu		ement 7 / Y	, , ,	, o ò -	7 Y					
Mailing Address PO Box 8295	Mailing Address PO Box 8295																
,	· ·						Amount of Each Disbursement this Period										
Purpose of Disbursement Payroll - Taxes										41	62.52	2					
Candidate Name				egory/ ype													
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (specify	General ✓			I	PAYR	OLL -	TÆ	AXES								
Full Name (Last, First, Middle Initial) Paychex/InterPay							action of Disbu		70613	.E9	778						
Mailing Address PO Box 8295						0 ^M 5	M /	□3	D / Y	Ž	o ŏ	7 ^Y					
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Payroll- Taxes Candidate Name																	
Office Sought: House Disburse Senate President	ment For: Primary Other (specify	General			ı	PAYR	OLL-	TΑ	XES								
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SUBTOTAL of Disbursements This Page (optional) .				▶						84	25.41						

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	y Information copied from such Reports and States for commercial purposes, other than using the name											
$ \rangle$	NAME OF COMMITTEE (In Full) Massachusetts Republican State Congres	sional Committee										
<u></u>	Full Name (Last, First, Middle Initial) Boston Postmaster							on ID:	706	13.E9	766	
	Mailing Address JW MCCORMACK STA	TION				0 ^M 5			D /	YZ	2 0 ŏ 7	Y
	New Chardon Street City Boston	State Zip Code MA 02114-				Amou	nt of	Each	Disbur	semer	nt this P	eriod
	Purpose of Disbursement Postage - General Use Non FEA Candidate Name			atego	ory/	L.	_				320.00	
		ement For: Primary General Other (specify) \(\bigvery \)		Type		POST FEA	ĀG	E - G	ENER	AL U	JSE N	ON
	State: District: Full Name (Last, First, Middle Initial) Boston Postmaster					Date of		sburse	D /			Y
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	City Boston	State Zip Code MA 02114-				Amou	nt of	Each	Disbur		t this P	
	Purpose of Disbursement Postage-General Candidate Name			atego Type	-						10.00	•
	Office Sought: House Senate President State: Disburs	ement For: Primary General Other (specify) \(\psi\)		1 3 100	,	POST	ĀG	E-GE	NERA	۱L		
	Full Name (Last, First, Middle Initial) T-Mobile T-Mobile					Date	of Di	sburse				
	Mailing Address PO Box 790047					0 ^M 5	M /	^D 0	7	2	2 0 ŏ 7	Y
	City Saint Louis	State Zip Code MO 63179-				Amou	nt of	Each	Disbur	semer	nt this P	eriod
	Purpose of Disbursement Phone Sevices					L.				5	39.78	_
	Candidate Name			atego Type	- 1							
	Office Sought: Senate President State: Disburs Disburs	ement For: Primary General Other (specify)				PHON	NE S	SEVIC	ES			
Г	ı										69.78	

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	NUMBER: PAGE 26 / 43 / one)							
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Any Information copied from such Reports and Statemor for commercial purposes, other than using the name		by any person f	or the purpose of soliciting contributions							
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	ional Committee									
Full Name (Last, First, Middle Initial) T-Mobile T-Mobile		Transaction ID: 70613.E9791 Date of Disbursement								
Mailing Address PO Box 790047			05 M / 21 / Y Y Y O Y 7							
	State Zip Code MO 63179-		Amount of Each Disbursement this Period							
Purpose of Disbursement Phone services			514.26							
Candidate Name		Category/ Type								
Office Sought: House Disburser Senate President State: District:	ment For: Primary General Other (specify)		PHONE SERVICES							
Full Name (Last, First, Middle Initial)			Transaction ID: 70516.E9757							
Verizon			Date of Disbursement							
Mailing Address P.O. Box 1			$\begin{bmatrix} \begin{smallmatrix} M & S & M \\ O & S & M \end{smallmatrix} & \begin{bmatrix} \begin{smallmatrix} D & D \\ O & T \end{smallmatrix} \end{bmatrix} & \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ Z & O & O & T \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y & Y \\ Z & O & O & T \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y & Y \\ Z & O & O & T \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y & Y \\ Z & O & O & T \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ Z & O & O & T \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y & Y \\ Z & O & O & T \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Z & O & O & T \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Z & Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Z & Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Z & Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Z & Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Z & Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Z & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Z & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Z & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Z & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Z & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \begin{bmatrix} Y & Y & Y \\ Y & Y \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Y & Y \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Y & Y \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \mathbf{Y} \end{bmatrix} & \begin{bmatrix} Y & Y & Y & Y \\ Y & Y \end{bmatrix} & \mathbf{Y} $							
•	State Zip Code MA 01654-		Amount of Each Disbursement this Period							
Purpose of Disbursement Phone			407.02							
Candidate Name		Category/ Type								
Office Sought: House Disburset Senate President State: District:	ment For: Primary General Other (specify) ▼		PHONE							
Full Name (Last, First, Middle Initial)			Transaction ID: 70618.E9808							
Verizon			Date of Disbursement							
Mailing Address P.O. Box 1			05 16 7 2007							
	State Zip Code MA 01654-		Amount of Each Disbursement this Period							
Purpose of Disbursement Phone -EFT payment			407.02							
Candidate Name		Category/ Type								
Office Sought: House Disburser Senate President	nent For: Primary General Other (specify)		PHONE -EFT PAYMENT							
State: District:										
SUBTOTAL of Disbursements This Page (optional)		>	1328.30							

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Any Information copied from such Reports and Statem or for commercial purposes, other than using the name													5			
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	ional Committe	e														
Full Name (Last, First, Middle Initial) Verizon Internet Services	Transaction ID: 70618.E9812 Date of Disbursement M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y															
Mailing Address PO Box 101096									27	L	. 2	007				
•	State Zip C GA 3039					Amou	nt o	f Each	Disbu	rser	-		-	d		
Purpose of Disbursement Internet Services						<u>L.</u>	_			_	7	67.62	2			
Candidate Name		C		egory/ ype												
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (specify)	General				INTERNET SERVICES										
Full Name (Last, First, Middle Initial) Verizon Internet Services						Trans				13.	E9	792				
Mailing Address PO Box 101096								Date of Disbursement M 5 M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
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Office Sought: House Disburse Senate President	ment For: Primary Other (specify)	General				INTEF	RNE	ET SE	RVIC	ES						
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WI-t Watson Law - Trust						Date o		sburse	ement	Y			Y			
Mailing Address 140 Great Rd.						0 5		3	3 0 /	L	2	0 ŏ 7	7			
	State Zip C MA 017					Amou	nt o	f Each	Disbu	rser	-		-	d		
Purpose of Disbursement Legal Consulting				- 1			-	-		0	100	00.00)			
Candidate Name		C		egory/ ype												
Office Sought: House Disburse Senate President	ment For: Primary Other (specify)	General				LEGA	L C	ONS	ULTI	NG						
State: District:	(-1)/	•														
SUBTOTAL of Disbursements This Page (optional) .				▶							253	35.24				

President District:

ago,, 20002210011			
SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 28 / 43
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	7 one) 22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and State or for commercial purposes, other than using the nan	ments may not be sold or used be ne and address of any political co	oy any person formittee to so	or the purpose of soliciting contributions licit contributions from such committee
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congres	ssional Committee		
Full Name (Last, First, Middle Initial) Robert Willington			Transaction ID: 70613.E9789 Date of Disbursement 05
Mailing Address 12 Arlington Street			05 21 2007
City Reading	State Zip Code MA 01867-		Amount of Each Disbursement this Period
Purpose of Disbursement Reimbursement: See below		• •	736.01
Candidate Name		Category/ Type	
Office Sought: Senate President State: Disburs Disburs State:	ement For: Primary General Other (specify)		REIMBURSEMENT: SEE BELOW
Full Name (Last, First, Middle Initial) Robert Willington			Transaction ID: 70613.E9790 Date of Disbursement
Mailing Address 12 Arlington Street			05 7 3 1 7 2 0 0 7
City Reading	State Zip Code MA 01867-		Amount of Each Disbursement this Period
Purpose of Disbursement R. Willington s Reimbursement for Personal car			597.50
Candidate Name		Category/ Type	[MEMO ITEM]
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)		MEMO: R. WILLINGTON S REI- MBURSEMENT FOR PERSONAL CAR USE

SUBTOTAL of Disbursements This Page (optional)	•	736.01
TOTAL This Period (last page this line number only)	•	30453.09

State:

	CHEDULE B (FEC Form 3 EMIZED DISBURSEMENT	' Use separate schedule(s	(check on	E NUMBER: PAGE 29 / 43 ly one) X 22 23 24 25 26 28a 28b 28c 29 30b
	y Information copied from such Reports ar for commercial purposes, other than using	•	, , ,	· ·
\rangle	NAME OF COMMITTEE (In Full) Massachusetts Republican State C	Congressional Committee		
	Full Name (Last, First, Middle Initial) Mass Republican State Committee Mailing Address 85 Merrimac Stre Suite 400			Transaction ID: 70514.E9745 Date of Disbursement O 5 M / D 1 D / Y Y Y O Y 7
	City Boston Purpose of Disbursement James S. Davis transfer of excess contril	State Zip Code MA 02114-		Amount of Each Disbursement this Period 5000.00
	Office Sought: House Senate President	Disbursement For: Primary General Other (specify) ▼	Category/ Type	
	State: District:	Cities (Specify)		

SUBTOTAL of Disbursements This Page (optional)	•	5000.00
TOTAL This Period (last page this line number only)	—	5000.00

	B (FEC Form 3X)	′ Use sepa	arate schedule(s)		FOR LIN	IE NUMBER:	P	AGE 30/	43
ITEMIZED DI	SBURSEMENTS	for each	category of the Summary Page		21b 27	22 23 28a 28	24 28c	25 29	X 3
	ed from such Reports and								
NAME OF COM	rposes, other than using th	e name and addre	ess of any political	com	millee to	SOlicit contributions	from such	committee	
1	s Republican State Co	ngressional Cor	mmittee						
Full Name (Last, Kirk Dobson	First, Middle Initial)					Transaction Date of Disbu	rsement	I.E9718	
Mailing Address	1209 Boylston St.					05 5	03	ŽOÒ	7 ^Y
City Boston		State MA	Zip Code 02215-			Amount of Ea	ch Disburse	ement this	Period
Purpose of Disbu Payroll	ursement							463.43	3
Candidate Name					ategory/ Type				
Office Sought:	Senate President	isbursement For: Primary Other (spe	General ecify) ▼			PAYROLL			
State:	District:								
Full Name (Last, Kirk Dobson	First, Middle Initial)					Transaction Date of Disbu	rsement	3.E9760	
Mailing Address	1209 Boylston St.					05	17 /	žoŏ	7 ^Y
City Boston		State MA	Zip Code 02215-			Amount of Ea	ch Disburse		
Purpose of Disbu Payroll						_ L		463.43	3
Candidate Name					ategory/ Type				
Office Sought:	Senate President	isbursement For: Primary Other (spe	General ecify) ▼			PAYROLL			
State:	District: First, Middle Initial)								
Kirk Dobson	Tilst, Middle Itiliai)					Transaction Date of Disbu	rsement		V
Mailing Address	1209 Boylston St.					0 5	31/	2007	7
City Boston		State MA	Zip Code 02215-			Amount of Ea	ch Disburse		
Purpose of Disbu								463.43	3
Candidate Name					ategory/ Type				
Office Sought:	Senate President	isbursement For: Primary Other (spe	General ecify) ▼			PAYROLL			
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SCHEDULE B (FEC FOIII 3X)	Use separate schedule	(s)	OR LINE I check only		₹:	L PA	AGE 31/	43
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	∍ I—̀	21b	22 [28a [23 28b	24 28c	25 29	
Any Information copied from such Reports and S or for commercial purposes, other than using the			y person fo	r the pur	pose of so	oliciting co	ontribution	S S
NAME OF COMMITTEE (In Full) Massachusetts Republican State Cong	·							
Full Name (Last, First, Middle Initial)				Transa	action ID:	70514	F9719	
Brian Dodge				Date of	f Disburse	ement		V
Mailing Address 10 Parker Road				0 5	0	3 /	200	7
City Groveland	State Zip Code MA 01834-			Amour	nt of Each	Disburse	ment this	Period
Purpose of Disbursement Payroll							2028.3	9
Candidate Name		Cate Ty	gory/					
Office Sought: House Dist Senate President State: District:	oursement For: Primary Gener Other (specify)	al		PAYR	OLL			
Full Name (Last, First, Middle Initial) Brian Dodge					action ID: f Disburse		3.E9761	
Mailing Address 10 Parker Road				0 5	1	7 /	200	7 ^Y
City Groveland	State Zip Code MA 01834-			Amour	nt of Each	Disburse	ement this	Period
Purpose of Disbursement Payroll							2028.3	9
Candidate Name		Cate Ty	gory/					
Office Sought: House Dist Senate President State: District:	oursement For: Primary Gener Other (specify) ▼	al		PAYR	OLL			
Full Name (Last, First, Middle Initial) Brian Dodge					action ID: f Disburse	ement	3.E9774	
Mailing Address 10 Parker Road				0 5	3	1 /	ŽOĎ	7 ^Y
City Groveland	State Zip Code MA 01834-			Amour	nt of Each	Disburse	ment this	Perio
Purpose of Disbursement Payroll		•		L.			2024.3	1
Candidate Name		Cate Ty	gory/					
Office Sought: House Senate President State: District:	oursement For: Primary Gener Other (specify) ▼	al		PAYR	OLL			
SUBTOTAL of Disbursements This Page (optic	nal)		<u> </u>				6081.0	9
TOTAL This Period (last page this line number	only)							
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	Use separate schedule(s) (ab		-OR LINE NUMBER: PAGE 32 / 43 check only one)							40		
IT 	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a		23 28b	24	1 3c	25 29	X 3
	y Information copied from such Reports and States for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full)											3
$ \rangle$	Massachusetts Republican State Congres	sional Committee										
	Full Name (Last, First, Middle Initial) Bruce Harrison							-	705 ement	16.E9	9750	
	Mailing Address 101 Elm St					0 ^M 5	M /	^D 0	7	Y 2	ž o ŏ 7	7 ^Y
	City Wakefield	State Zip Code MA 01880-				Amou	ınt of	Each	Disbu		nt this F	
	Purpose of Disbursement Payroll-Administration Candidate Name		Ca	atego	ry/					1(00.00)
	Office Sought: House Disburs	ement For: Primary General Other (specify) ▼		Туре		PAYF	ROLI	L-AD	MINIS	TRAT	ΓΙΟΝ	
	Full Name (Last, First, Middle Initial) Lyndsay Jones					Date			705 ement			V
	Mailing Address 16 Oval Road					0 5	M /	ီ0	3 /	. 2	ž o ŏ 7	7
	City Quincy	State Zip Code MA 02170-				Amou	int of	Each	Disbu		nt this F	
	Purpose of Disbursement Payroll Candidate Name			atego Type	ry/			•				
	Office Sought: Senate President State: Disburs	ement For: Primary General Other (specify) ▼	-			PAYF	ROLI	L				
	Full Name (Last, First, Middle Initial) Lyndsay Jones					Date	of Di	sburse				V
	Mailing Address 16 Oval Road					0 ^M 5	M /	^D 2	! 1	¥ 2	ž o ŏ 7	7
	City Quincy	State Zip Code MA 02170-				Amou	ınt of	Each	Disbu		nt this F	
	Purpose of Disbursement Payroll					L.		•		12	236.59)
	Candidate Name			atego Type	ry/							
	Office Sought: Senate President State: Disburs Disburs State:	ement For: Primary General Other (specify) ▼				PAYF	ROLI	L				
							_				11.35	

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ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check on 21b 27	22 23 24 25 28a 28b 28c 29 X
Any Information copied from such Reports and State or for commercial purposes, other than using the na			
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congre	ssional Committee		
Full Name (Last, First, Middle Initial)			Transaction ID: 70613.E9775
Lyndsay Jones			Date of Disbursement
Mailing Address 16 Oval Road			05 7 2 0 0 7
City	State Zip Code		Amount of Each Disbursement this Period
Quincy Purpose of Disbursement	MA 02170-	l	1236.59
Payroll			
Candidate Name		Category/ Type	
Senate President	sement For: Primary General Other (specify) ▼		PAYROLL
State: District: Full Name (Last, First, Middle Initial)			T .: ID 70544 50704
Peter Torkildsen			Transaction ID: 70514.E9721 Date of Disbursement
Mailing Address 1 Stony Brook Road			$\begin{bmatrix} 0.5 & \text{M} & \text{M} & \text{D} & 0.3 & \text{M} & \text{Y} & 2.0 & 0.7 \end{bmatrix}$
City Chelmsford	State Zip Code MA 01863-		Amount of Each Disbursement this Perio
Purpose of Disbursement Payroll			2567.76
Candidate Name		Category/ Type	
Office Sought: House Senate President State: District:	sement For: Primary General Other (specify) ▼	Туре	PAYROLL
Full Name (Last, First, Middle Initial) Peter Torkildsen			Transaction ID: 70613.E9763 Date of Disbursement
Mailing Address 1 Stony Brook Road			$\begin{bmatrix} 0.5 & M & / & D & D & / & Y & Y & Y & 0 & Y & Y \\ 0.5 & M & / & D & 1 & 7 & / & Y & 2 & 0 & 0 & 7 & Y \end{bmatrix}$
City Chelmsford	State Zip Code MA 01863-		Amount of Each Disbursement this Perio
Purpose of Disbursement Payroll			2567.76
Candidate Name		Category/ Type	
Senate President	sement For: Primary General Other (specify) ▼		PAYROLL
State: District:			
SUBTOTAL of Disbursements This Page (optional	1		6372.11

	Use separate schedule(s)		FOR LINE NUMBER: PAGE (check only one)						34 / 43			
IT _	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a		23 28b	2 2	4 8c	25 29	X 3
	y Information copied from such Reports and State for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full) Massachusetts Republican State Congres	ne and address of any politica										S
\mathbb{Z}	Full Name (Last, First, Middle Initial)											
	Peter Torkildsen					Date		sburs	: 706 ement 3 1		9//6 2007	Y
	Mailing Address 1 Stony Brook Road					0.5		3	5 1		200	
	City Chelmsford	State Zip Code MA 01863-				Amou	ınt of	Each	Disbu		ent this I	
	Purpose of Disbursement Payroll Candidate Name		C	ateg	ory/					2	563.68	3
		ement For:		Тур		PAYF	201	ı				
	Senate President State: District:	Primary General Other (specify) ▼				PATE	iOL	L				
	Full Name (Last, First, Middle Initial) Robert Willington					Date	of Di	sburs	: 705 ement			V
	Mailing Address 12 Arlington Street					0 ^M 5	М	^D C	3 /	¥ .	ž 0 ŏ 7	7 1
	City Reading	State Zip Code MA 01867-				Amou	ınt of	Each	Disbu		ent this I	
	Purpose of Disbursement Payroll						•			. 1	236.59	9
	Candidate Name			ateg Typ	-							
	Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)				PAYF	ROL	L				
	Full Name (Last, First, Middle Initial) Robert Willington					Date	of Di	sburs	: 706 ement			
	Mailing Address 12 Arlington Street					0 ^M 5	М	1	^D 7	Y	ž 0 ŏ 7	7 ^Y
	City Reading	State Zip Code MA 01867-				Amou	ınt of	Each	Disbu	rseme	ent this I	Period
	Purpose of Disbursement Payroll					<u></u>				1	236.59	9
	Candidate Name			ateg Typ								
	Senate President	ement For: Primary General Other (specify)				PAYF	ROL	L				
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUM	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		22
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name	,		
NAME OF COMMITTEE (In Full)			
Massachusetts Republican State Congress	sional Committee		
Full Name (Last, First, Middle Initial)		Ti	ransaction ID: 70613.E9777
Robert Willington		D	ate of Disbursement
Mailing Address 12 Arlington Street			05 M / 03 1 / Y Y Y Y Y Y
City	State Zip Code	А	mount of Each Disbursement this Period
Reading	MA 01867-	Г	
Purpose of Disbursement Payroll			1236.59
Candidate Name	l l	ategory/ Type	
Senate President	ment For: Primary General Other (specify)	P/	AYROLL
State: District:			

SUBTOTAL of Disbursements This Page (optional)	•	1236.59
TOTAL This Period (last page this line number only)		23328.29

PAGE 36 / 43 SCHEDULE D (FEC Form 3X) (Use separate FOR LINE NUMBER: schedule(s) **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for direct mail - party related non FEA **SCM Associates** Steve Meyers Mailing Address 1283 Main Street City ZIP Code State Dublin NH 03444-Outstanding Balance Beginning This Period Transaction ID: LS90508.E11236 9891.83 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 9891.83 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for direct mail - party related non FEA **SCM Associates** Mailing Address Steve Meyers 1283 Main Street 7IP Code City State Dublin NH 03444-Outstanding Balance Beginning This Period Transaction ID: LS90508.E11238 475.83 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 0.00 475.83 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for direct mail - party related non FEA SCM Associates Mailing Address Steve Meyers 1283 Main Street ZIP Code City State Dublin 03444-NH Outstanding Balance Beginning This Period Transaction ID: LS90508.E11245 5311.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 5311.00 15678.66 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)...... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

PAGE 37 / 43 SCHEDULE D (FEC Form 3X) (Use separate FOR LINE NUMBER: schedule(s) **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for direct mail - party related non FEA **SCM Associates** Steve Meyers Mailing Address 1283 Main Street City ZIP Code State 03444-Dublin NH Outstanding Balance Beginning This Period Transaction ID: LS90508.E11239 15.69 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 15.69 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for direct mail - party related non FEA **SCM Associates** Mailing Address Steve Meyers 1283 Main Street 7IP Code City State Dublin NH 03444-Outstanding Balance Beginning This Period Transaction ID: LS90508.E11247 9980.45 Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 0.00 0.00 9980.45 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for direct mail - party related non FEA SCM Associates Mailing Address Steve Meyers 1283 Main Street ZIP Code City State Dublin 03444-NH Outstanding Balance Beginning This Period Transaction ID: LS90508.E11240 1445.12 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 1445.12 11441.26 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)...... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

PAGE 38 / 43 SCHEDULE D (FEC Form 3X) (Use separate FOR LINE NUMBER: schedule(s) **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for direct mail - party related non FEA **SCM Associates** Steve Meyers Mailing Address 1283 Main Street City ZIP Code State Dublin NH 03444-Outstanding Balance Beginning This Period Transaction ID: LS90508.E11241 3.58 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 3.58 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for direct mail - party related non FEA **SCM Associates** Mailing Address Steve Meyers 1283 Main Street 7IP Code City State Dublin NH 03444-Outstanding Balance Beginning This Period Transaction ID: LS90513.E11249 3814.75 Payment This Period Amount Incurred This Period Outstanding Balance at Close of This Period 0.00 0.00 3814.75 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for direct mail - party related non FEA SCM Associates Mailing Address Steve Meyers 1283 Main Street ZIP Code City State Dublin 03444-NH Outstanding Balance Beginning This Period Transaction ID: LS90513.E11248 3909.25 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 3909.25 7727.58 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)...... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

PAGE 39 / 43 SCHEDULE D (FEC Form 3X) (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for direct mail - party related non FEA **SCM Associates** Mailing Address Steve Meyers 1283 Main Street City ZIP Code State 03444-Dublin NH Outstanding Balance Beginning This Period Transaction ID: LS90513.E11251 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 15.37 0.00 15.37 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for direct mail - party related non FEA **SCM Associates** Mailing Address Steve Meyers 1283 Main Street 7IP Code City State Dublin NH 03444-Outstanding Balance Beginning This Period Transaction ID: LS90508.E11237 9351.63 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 9351.63 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Payment of debt for resea-Lexis-Nexis rch party related Mailing Address PO Box 7247-7090 ZIP Code City State Philadelphia PA 19170-Outstanding Balance Beginning This Period Transaction ID: LS70613.E9786 1250.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1250.00 0.00 9367.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)...... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

PAGE 40 / 43 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for research party related Lexis-Nexis Mailing Address PO Box 7247-7090 City State ZIP Code Philadelphia PA 19170-Outstanding Balance Beginning This Period Transaction ID: LS90513.E11275 1250.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 1250.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for research Lexis-Nexis party related Mailing Address PO Box 7247-7090 ZIP Code City State Philadelphia PA 19170-Outstanding Balance Beginning This Period Transaction ID: LS90513.E11276 1250.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 1250.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for research Lexis-Nexis party related Mailing Address PO Box 7247-7090 State ZIP Code City Philadelphia PA 19170-Outstanding Balance Beginning This Period Transaction ID: LS90513.E11277 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 1250.00 0.00 1250.00 3750.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only).....

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

(Use separate schedule(s) for each

PAGE 41 / 43 FOR LINE NUMBER: (check only one) 9

NAME OF COMMITTEE (In Full)
Massachusetts Republican State Congressional Committee

Excluding Loans			numbered line)	X 10
NAME OF COMMITTEE	•			
Massachusetts Repul	blican State Congression	al Committee		
▲ Full Name (Last I	First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):	
ENlisson ENilsson			Original debt for IT support party related non fea)-
			ort party related non fea	ı
Mailing Address 6	Depot Street			
City	State	ZIP Code		
Westford	MA	01886-		
Outstanding Balance Beginning This Period			Transaction ID: LS	390513.E11301
1252.00				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Clo	ose of This Period
	0.00	0.00	1252.00	
	0.00	0.00		1232.00
, ,	First, Middle Initial) of Debtor	or Creditor	Nature of Debt (Purpose):	
Garage Government Center			Original debt for parking party related non fea	J
Mailing Address 50	New Sudbury Street			
City Boston	State MA	ZIP Code 02114-		
	ce Beginning This Period	02111	Transaction ID: LS	200512 E11202
Outstanding Balance			Transaction ib. Lo	90313.L11290
1280.00				
Amount Incurred This Period		Payment This Period	Outstanding Balance at Clo	ose of This Period
	0.00	0.00		1280.00
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):	
Garage Governme	ent Center		Original debt for parking party related non fea	J
Mailing Address 50 New Sudbury Street			party rolated from roa	
	Trow edubary erroet			
City	State	ZIP Code		
Boston	MA	02114-		
Outstanding Balance Beginning This Period			Transaction ID: LS	390513.E11296
	640.00			
Amount Incurred This Period		Payment This Period	Outstanding Balance at Clo	ose of This Period
	0.00	0.00		640.00
1) CURTOTALS. This I	Period This Page (entional)		> 3	3172.00
1) SUBTOTALS This Period This Page (optional)				1 1 1
2) TOTALS This Period (last page this line number only)			>	
3) TOTAL OUTSTAND	ING LOANS from Schedu	le C (last page only)	>	
4) ADD 2) and 3) and	carry forward to appropriate li	ne of Summary Page (last page only)	>	

PAGE 42 / 43 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for parking party related non fea Garage Government Center Mailing Address 50 New Sudbury Street City State ZIP Code **Boston** MA 02114-Outstanding Balance Beginning This Period Transaction ID: LS90513.E11295 640.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 640.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Payment for debt for parking party related non fea Garage Government Center Mailing Address 50 New Sudbury Street ZIP Code State City **Boston** MA 02114-Outstanding Balance Beginning This Period Transaction ID: LS90513.E11299 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 640.00 0.00 640.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for IT Support party related non fea mindShift Technologies, Inc. Mailing Address PO Box 200105 ZIP Code City State Pittsburgh PA 15251-Outstanding Balance Beginning This Period Transaction ID: LS90513.E11287 1696.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 1696.00 2976.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only).....

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

Image# 29992216859 PAGE 43 / 43 **SCHEDULE D (FEC Form 3X)** (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for IT Support party related non fea mindShift Technologies, Inc. Mailing Address PO Box 200105 City State ZIP Code Pittsburgh PA 15251-Outstanding Balance Beginning This Period Transaction ID: LS90513.E11286 1596.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 1596.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original debt for IT SuppmindShift Technologies, Inc. ort party related non fea Mailing Address PO Box 200105 7IP Code City State Pittsburgh PA 15251-Outstanding Balance Beginning This Period Transaction ID: LS90513.E11288 0.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 1696.00 0.00 1696.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Original Debt for FEA Get Out the Vote Mailing Communication, Inc. Majority Mailing Address 274 Marconi Blvd. Suite 260 ZIP Code City State Columbus OH 43215-Outstanding Balance Beginning This Period Transaction ID: LS90508.E11226

1) SUBTOTALS This Period This Page (optional)	▶ 18292.00
2) TOTALS This Period (last page this line number only)	▶ 72404.50
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶ 0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	► 72404.50

Payment This Period

0.00

15000.00

0.00

Amount Incurred This Period

Outstanding Balance at Close of This Period

15000.00